1,31,33

PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998

**Application or Docket Number** 

| CLAIMS AS FILED - PART I<br>(Column 1) (Column 2)   |   |                  |                                |       |   |                  |      | SMALL ENTITY  |                        |         | OTHER THAN<br>OR SMALL ENTITY |                        |
|---|---|------------------|--------------------------------|-------|---|------------------|------|---------------|------------------------|---------|-------------------------------|------------------------|
| FOR   |   |                  | NUMBER FILED                   |       | NUMBER                                      | NUMBER EXTRA     |      | RATE          | FEE                    | 7       | RATE                          | FEE                    |
| BASIC FEE   |   |                  |                                |       |   |                  |      | 380.00        | OR                     | ,       | 760.00                        |                        |
| TOTAL CLAIMS  |   |                  |                                | # /6  |   |                  |      | X\$ 9=        | 135                    | OR      | X\$18=                        |                        |
| INDEPENDENT CLAIMS   minus 3 =  *   |   |                  |                                |       |   |                  | X39= | 39            | OR                     | X78=    |                               |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |   |                  |                                |       |   |                  |      | +130=         |                        | OR      | +260=                         |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |   |                  |                                |       |   |                  |      | TOTAL         | 45                     | OR      | TOTAL                         |                        |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)  |   |                  |                                |       |   |                  |      | SWALL         | SY                     | OR      | OTHER<br>SMALL                |                        |
| AMENDWENT A   |   | CL<br>REM.<br>AF | AIMS<br>AINING<br>TER<br>DMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |      | RATE          | ADDI-<br>TIONAL<br>FEE |         | RATE                          | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *                |                                | Minus | ##  | =                |      | X\$ 9=        |                        | OR      | X\$18=                        |                        |
| ARME  | Independent   | *                |                                | Minus | ***   | =                |      | X39=          |                        | OR      | X78=                          |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                  |                                |       |   |                  |      | +130=         |                        | OR      | +260=                         |                        |
|   | >   |                  |                                |       |   |                  | L    | TOTAL         |                        |         | TOTAL                         |                        |
| ADDIT. FEE (Column 1) (Column 2) (Column 3)   |   |                  |                                |       |   |                  |      |               |                        | <u></u> | ADDIT. FEE                    |                        |
| AMENDMENT B   |   | REMA<br>AF       | AIMS<br>AINING<br>TER<br>DMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |      | RATE          | ADDI-<br>TIONAL<br>FEE |         | RATE                          | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *                |                                | Minus | жж  | =                |      | X\$ 9=        |                        | OR      | X\$18=                        |                        |
|   | Independent   | *                |                                | Minus | <b>प्रमे</b>                                | =                |      | X39=          |                        | OR      | X78=                          | 4 - 1                  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                  |                                |       |   |                  |      | +130=         |                        |         | +260=                         |                        |
|   |   |                  |                                |       |   |                  |      | TOTAL         |                        | OR      | TOTAL                         |                        |
|   | (Column 1) (Column 2) (Column 3)  |                  |                                |       |   |                  |      |               |                        | OR      | ADDIT. FEE                    |                        |
| ပ   |   | CLA              | IMS                            |       | (Column 2)<br>HIGHEST                       | (Column 3)       |      |               | ADDI                   | li      |                               |                        |
| AMENDMENT (   |   |                  | INING<br>TER<br>DMENT          |       | NUMBER<br>PREVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA | F    | RATE          | ADDI-<br>TIONAL<br>FEE |         | RATE                          | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *                |                                | Minus | πά  | =                | ,    | <b>(\$ 9=</b> |                        | OR      | X\$18=                        |                        |
|   | Independent   | *                |                                | Minus | ***   | =                |      | <b>(39=</b>   |                        | }       | X78=                          | 4 = 19                 |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                  |                                |       |   |                  |      |               |                        | OR      | X, 62                         |                        |
| * 11  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |                  |                                |       |   |                  |      |               |                        | OR      | +260=                         |                        |
| ***   | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |                  |                                |       |   |                  |      |               |                        |         | TOTAL<br>ADDIT. FEE           |                        |
| The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                  |                                |       |   |                  |      |               |                        |         |                               | l l                    |